Homebirth as Actor-Network: Multiple realities

The topic of this medical anthropology thesis is a description of homebirth seen through the eyes of Actor-Network Theory. The focus of this work is thus not on the professional concept of homebirth as a biological process or soon-to-be-mothers experience and take on homebirth. Focus is on homebirth in itself, how it is enacted in practice. After the presentation of two points of view on medicine (disease and illness), an introduction into the basic principles and innovations of ANT (including anthropology of symmetry) and works of people, who build their ideas on it (Mol – multiplicity, De Laet – fluidity, Law), the thesis shifts its focus to the description of the whole actor-network, which enacts homebirth via interaction between the actors in practice. These practices are abstracted from the interviews with mothers, a dula and a paediatrician. The description includes people and objects, because according to ANT, they have the same amount of social agency. Homebirth is then enacted by the objects needed for homebirth – tools to make birth easier and to support its process, by people who partake, venues it takes place and the birthing positions it brings. Another part of the actor-network can be found before the homebirth happens – the hunt for information on homebirth from books or another human being or the experience of birth in the hospital, which creates a benchmark for how not to give birth. Last but not least, the thesis explores the boundaries of the actor-network of the homebirth, when it can’t be enacted. The description reveals not just one reality of homebirth, but multiple versions, which are specific for different households, times and situations.